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APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/290,149	04/12/1999	TODD D. ALLECKSON	10990978-1	9522
22878	7590	09/29/2004	EXAMINER	
AGILENT TECHNOLOGIES, INC. INTELLECTUAL PROPERTY ADMINISTRATION, LEGAL DEPT. P.O. BOX 7599 M/S DL429 LOVELAND, CO 80537-0599			RIMELL, SAMUEL G	
		ART UNIT	PAPER NUMBER	
		2175		

DATE MAILED: 09/29/2004

Please find below and/or attached an Office communication concerning this application or proceeding.

<b>Office Action Summary</b>	Application No.	Applicant(s)
	09/290,149	ALLECKSON ET AL.
	Examiner Sam Rimell	Art Unit 2175

-- The MAILING DATE of this communication appears on the cover sheet with the correspondence address --

**Period for Reply**

A SHORTENED STATUTORY PERIOD FOR REPLY IS SET TO EXPIRE 3 MONTH(S) FROM THE MAILING DATE OF THIS COMMUNICATION.

- Extensions of time may be available under the provisions of 37 CFR 1.136(a). In no event, however, may a reply be timely filed after SIX (6) MONTHS from the mailing date of this communication.
- If the period for reply specified above is less than thirty (30) days, a reply within the statutory minimum of thirty (30) days will be considered timely.
- If NO period for reply is specified above, the maximum statutory period will apply and will expire SIX (6) MONTHS from the mailing date of this communication.
- Failure to reply within the set or extended period for reply will, by statute, cause the application to become ABANDONED (35 U.S.C. § 133). Any reply received by the Office later than three months after the mailing date of this communication, even if timely filed, may reduce any earned patent term adjustment. See 37 CFR 1.704(b).

**Status**

- 1) Responsive to communication(s) filed on \_\_\_\_.
- 2a) This action is **FINAL**.                            2b) This action is non-final.
- 3) Since this application is in condition for allowance except for formal matters, prosecution as to the merits is closed in accordance with the practice under *Ex parte Quayle*, 1935 C.D. 11, 453 O.G. 213.

**Disposition of Claims**

- 4) Claim(s) 1,3-5,7-17,19 and 21-32 is/are pending in the application.
- 4a) Of the above claim(s) \_\_\_\_ is/are withdrawn from consideration.
- 5) Claim(s) \_\_\_\_ is/are allowed.
- 6) Claim(s) 1, 3-5, 7-17, 19, 21-32 is/are rejected.
- 7) Claim(s) \_\_\_\_ is/are objected to.
- 8) Claim(s) \_\_\_\_ are subject to restriction and/or election requirement.

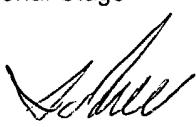
**Application Papers**

- 9) The specification is objected to by the Examiner.
- 10) The drawing(s) filed on \_\_\_\_ is/are: a) accepted or b) objected to by the Examiner.  
Applicant may not request that any objection to the drawing(s) be held in abeyance. See 37 CFR 1.85(a).  
Replacement drawing sheet(s) including the correction is required if the drawing(s) is objected to. See 37 CFR 1.121(d).
- 11) The oath or declaration is objected to by the Examiner. Note the attached Office Action or form PTO-152.

**Priority under 35 U.S.C. § 119**

- 12) Acknowledgment is made of a claim for foreign priority under 35 U.S.C. § 119(a)-(d) or (f).  
a) All    b) Some \* c) None of:
  1. Certified copies of the priority documents have been received.
  2. Certified copies of the priority documents have been received in Application No. \_\_\_\_.
  3. Copies of the certified copies of the priority documents have been received in this National Stage application from the International Bureau (PCT Rule 17.2(a)).

\* See the attached detailed Office action for a list of the certified copies not received.

  
SAM RIMELL  
PRIMARY EXAMINER

**Attachment(s)**

1) <input type="checkbox"/> Notice of References Cited (PTO-892)	4) <input type="checkbox"/> Interview Summary (PTO-413)
2) <input type="checkbox"/> Notice of Draftsperson's Patent Drawing Review (PTO-948)	Paper No(s)/Mail Date: ____
3) <input type="checkbox"/> Information Disclosure Statement(s) (PTO-1449 or PTO/SB/08) Paper No(s)/Mail Date: ____	5) <input type="checkbox"/> Notice of Informal Patent Application (PTO-152)
	6) <input type="checkbox"/> Other: ____

The following is a quotation of the appropriate paragraphs of 35 U.S.C. 102 that form the basis for the rejections under this section made in this Office action:

A person shall be entitled to a patent unless –

(e) the invention was described in a patent granted on an application for patent by another filed in the United States before the invention thereof by the applicant for patent, or on an international application by another who has fulfilled the requirements of paragraphs (1), (2), and (4) of section 371(c) of this title before the invention thereof by the applicant for patent.

Claims 1, 3-5, 7-17, 19, 21-32 are rejected under 35 U.S.C. 102(e) as being anticipated by Brown (U.S. Patent 5,832,448).

Claim 1: FIG. 1 of Brown discloses an arrangement where digital data is received at a clinical server (12) from patient sites (36, 46). The digital data is processed so as to produce the output screens (26). The data displayed on the output screens includes clinical statistics (blood glucose values) and administrative statistics (the names of the patients, the dates of data receipt and the completeness of the data). The clinical server (12) provides access to the data by one or more clinicians. The protocol for communicating the data between the patients and the physicians may inherently be Internet protocol, particularly as the data is communicated over a telephone network using standard modems. The output screen (26) is actually a series of hierarchical output screens. The output screens can be hierarchically arranged by patient group, date of data collection, or individual patient being viewed. Each screen may represent a “higher” or “lower” hierarchical level, although the claims do not state what exactly constitutes a “higher” level or “lower” level. Statistics from 10 patients are collected and presented on chart (26). The physician can further select or flag patients. The patients can also be flagged automatically by presenting a blinking icon, represented by the dashed diamonds. The blinking icon represents non-compliant data (col. 7, lines 1-37). The conclusion that non-compliant data exists is the

result of processing and evaluating statistics (glucose data) from the patient. When the physician selects the flagged patients (as evidenced by the dashed circles) a list is automatically generated of the names in listbox (70). The physician does not manually type in the names. They are automatically printed in the box (70) after the selection. A snapshot screen is illustrated in FIG. 5. This screen is a screen display of an e-mail that pertains to a specific patient and includes at least one field pertaining to a treatment plan: "Measure You Blood Glucose Regularly".

Claim 3-4: As seen in screen (26), the digital data from the patient has an associated time scale, and the absolute time of measurement events is determined and displayed on the on the chart (26).

Claim 5: The system derives data from a plurality of patients. The time scale of the data is determined and displayed.

Claim 7: When the data is flagged in display (26) the patient has a health parameter with at least functional parameter that is out of a desired range.

Claim 8: Statistics are continually received from patients over time, and thus continually updated.

Claim 9: The clinician may select patients that have been flagged to appear on a printed list or receive messages. The physician can access clinical information by reviewing the display (26).

Claim 10-11: The collection of data over a period of days, as in display (26) presents a series of historical data.

Claim 12: Statistics are presented on the devices and flags of health parameters.

Claim 13: The users of the system of FIG. 1 have different levels of access. Patients cannot access the data sent to the clinician.

Claim 14: See remarks for claim 1.

Claim 15-16: See remarks for claims 3-4.

Claim 17: The system includes a master patient database (18) which includes a memory.

Claim 19: See remarks for claim 1.

Claim 21: See remarks for claims 10-11.

Claim 22: Items can be selected for graphical display, such as date of collection, name of patient, and patient group.

Claim 23: See remarks for claim 8.

Claim 24: See remarks for claim 1.

Claim 25: See remarks for claim 22.

Claim 26: The administrative computer is the server (12). The clinician computer is the clinician workstation (22).

Claims 27-28: See remarks for claims 1 and 3.

Claim 29-32: As seen in viewer (26) the name of a specific patient is selected. Particular data for the patient is flagged by a dotted line. The date of flagging is indicated by the date indicated in the top right corner. The reason for flagging is due to sparse or non-compliant data. The patient's telephone number would inherently be located in the master patient database, and being in this database, retrievable by the clinician.

Remarks

Applicant's arguments have been considered.

Applicant argues that Brown does not teach a flagged list of patients having health parameters outside a pre-set range.

Examiner maintains that this feature resides in the Brown reference. The indication of non-compliance (parameter values which are outside of a pre-set range) is a blinking icon in the Brown reference. This is clearly and unquestionably an act of flagging since it has the exact intent and purpose of drawing attention to specific non-compliant patients. Once the physician selects flagged icons (as illustrated in FIG. 3), the list of patients is produced in the listbox (70). The physician does not manually type in the names, which would occur in the case of a manually produced list. Rather, the physician selects the icon of a flagged patient and the name automatically appears in the list box (70). This fully reads on the claimed requirements for generation of a list of flagged patients having health parameters outside of a desired range.

Applicant also argues that Brown does not teach the presence of a snapshot screen. However, this is illustrated in FIG. 5. The screenshot of FIG. 5 is an e-mail template and reads as a snapshot screen. This screen pertains to a specific patient and includes a field for treatment plan information ("Measure Your Blood Glucose Regularly").

This office action is non-final.

Any inquiry concerning this communication should be directed to Sam Rimell at  
telephone number (703) 306-5626.



Sam Rimell  
Primary Examiner  
Art Unit 2175